

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/550,137-Conf. #1324
	Filing Date	March 23, 2004
	First Named Inventor	Mats Inganäs
	Art Unit	1641
	Examiner Name	Not Yet Assigned
	Attorney Docket No.	60889/HO-P02773US1-10304061

Please change the Correspondence Address for the above-identified application to:

☒ The address associated with Customer Number:

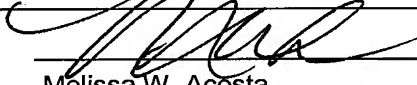
OR

<input type="checkbox"/> Firm or Individual Name				
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City		State		Zip
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I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 45,872.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Signature	
Typed or Printed Name	Melissa W. Acosta
Date	May 14, 2007
Telephone	(214) 855-7163

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

<input type="checkbox"/> *Total of <u>1</u> forms are submitted.
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